



2009026227
07/23/2009 03:59:22 PM
3 Pages FILED
MISCELLANEOUS FILING
Kathleen A Marchione Saratoga Co Clerk

Date: June 8, 2009

TO: Internal Revenue Service
Technical Services Advisory Group
ATTN: George Checksfield, Manager
130 S. Elmwood Ave., Suite 100
Buffalo, New York 14202-2464

FROM: Barbara Jean Jeske
P.O. Box 5495
Clifton Park, New York 12065
SSN or EIN: [REDACTED] (None recorded on the "Notice
of Federal Tax Lien")
BS

RE: Release of "Notice of Federal Tax Lien" pursuant to 26
CFR, Section 401.6325

NOTICE OF DEFAULT

Dear Mr. Checksfield:

Having received no response to my request dated May 2nd, 2009, and received by you on May 11, 2009 this serves as Notice that you are now in Default. Your silence assumes agreement with the 14 points given as grounds for the alleged "Notice of Lien" being legally unenforceable. This being true and correct, please issue a **Certificate of Release** regarding alleged "Notice of Federal Tax Lien", fraudulently recorded on April 11, 2008 by the Saratoga County Clerk's Office in Saratoga County, New York as Instrument #2008024129 with Serial #437452308, **immediately**.

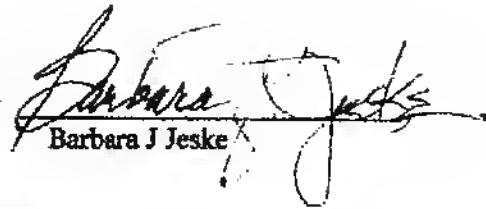
Sincerely,

Barbara Jeske

Notarization and Notice of document being made part of permanent record on Page 2

Dated: June 9, 2009

By:


Barbara J. Jeske

Acknowledgment

New York State

Saratoga County

)
Sworn and Subscribed:
)

For verification purposes only

SUBSCRIBED AND SWORN TO before me by Barbara Jeske, known to me or proven to
me to be the real woman signing this document this 9th day of June, 2009.

WITNESS my hand and official seal.

Dawn L. Morrison
NOTARY PUBLIC

June 9, 2009 (Seal)
DATE

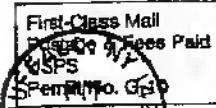
My commission expires: _____, 20____ (Stamp)

DAWN L. MORRISON
Notary Public, State of New York
Qualified in Saratoga County
No. 01MO604819
My Commission Expires Dec. 16, 2010

You hereby have private NOTICE that this entire document must be filed
as a permanent part of the IRS/TDA/AIMS/IMF/23C record for TIN
[REDACTED]. If such record(s) have been deleted or substituted, this
demand still applies to said records by whatever name they are now
known.

Recorder's initials: [initials]

UNITED STATES POSTAL SERVICE

Print your name, address, and ZIP Code in this box. **12065**

BARBARA JESKE
C/O P.O. BOX 5405
CLIFTON PARK, NY
12065

12065

Indicates the service you want to receive:

SENDER:

- Complete Items 1 and/or 2 for additional services.
Complete Items 3, 4a, and 4b.
- Print your name and address on the reverse of this form so that we can return this card to you.
- Attach this form to the front of the mailpiece, or on the back if space does not permit.
- Write "Return Receipt Requested" on the mailpiece below the article number.
- The Return Receipt will show to whom the article was delivered and the date delivered.

3. Article Addressed to:

I.R.S.
Technical Services Advisory Grp.
Attn: Geo. Checksfield, Manager
130 S. Elmwood Ave., Ste. 100
Buffalo, NY
14202-2464

7001 1940 0006 3976 6487

I also wish to receive the following services (for an extra fee):

1. Addressee's Address
2. Restricted Delivery

Ipt Service.

Thank you for using Return

Is your RETURN ADDRESS completed on the reverse side?

- | | | |
|-----------------|---|------------------------------------|
| 4. Service Type | <input type="checkbox"/> Registered | <input type="checkbox"/> Certified |
| | <input type="checkbox"/> Express Mail | <input type="checkbox"/> Insured |
| | <input type="checkbox"/> Return Receipt for Merchandise | <input type="checkbox"/> COD |

7. Date of Delivery

6/24/09

- | |
|--|
| 6. Addressee's Address (Only if requested and fee is paid) |
|--|

5. Received By: (Print Name)
JFF 211506. Signature (Addressee or Agent)
JFF 21150

PS Form 3811, December 1994

102505-96-B-0223 Domestic Return Receipt